

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Susan H. Paschell; James P. Monahan II. Name of lobbyist's partnership, firm or corporation, if any:					
114 N Main St. Suit	e 401 Concord, NH 03301				
) (Town/City) (State) (Zip Code)				
(603)228-3322	(603) 228-0713	e-mail <u>imonahan@dupontgroup.com</u>			
(Telephone)	(Fax)				
	covers: (Choose one – file separate reports is which are not attributable to any one cli	for each client, OR you may file a separate report for reportable ent).			
All reportable	transactions occurring in the month prior to t	he reporting date relative to the following client:			
Bi State Primary C	are Association				
<u>OR</u>	(Full Name of Client as it appear	rs on the Lobbyist Registration Form)			
All reportable tra		yist's family), or the lobbying firm listed below which are unrelated			
IV. Date of Report	April 26, 2017	July 26, 2017 X			
Reports cover	activity from date of registration to 3/31/1	· · · · · · · · · · · · · · · · · · ·			
	October 25, 2017 activity from 7/1/17 to 9/30/17	January 31, 2018 ☐ activity from 10/1/17 to 12/31/17			
	no fees received and no reportable transa d, complete just this form and submit it to the	ctions made since the last report. Secretary of State's Office, State House, Room 204, Concord, NH			
V. Check if addition If you have received	onal reports are attached: ved fees or made expenditures, you must file	Addendum A- Fees and Expenses			
☐ If you have paid Reimbursement	an honorarium or reimbursed expenses, you	must file Addendum B- Report of Honorariums or Expense			
☐ If you, your firm	, or your family has made political contributi	ons, you must file Addendum C- Political Contributions.			
I have read RSA 15, best of my knowledg	ge and belief.	or affirm that the foregoing information is true and complete to the			
pusaut.	Paschell				
(Signature of lobbyist)		<u>7/26/2017</u> (Date)			
Susan H. Paschell					



STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)				
Susan H. Paschell ; James P. Monahan				
II. Name of lobbyist's partnership, firm or corporation, if any:				
The Dupont Group				
(Name of partnership, firm or corporation)				
III. Name of Client Bi State Primary Care Association	<u>D</u> ate 7/26/2017			
IV. Fees Received Indicate the gross amount of all fees received from the client identified above the including fees for services such as public advocacy, government relations, or public legislation, and related legal work. The gross fee amount reported shall not be received.	ublic relations services including research, monitoring			
a) Total of all fees received in this reporting period	a) \$9000			
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b)\$9000			
c) Total of all fees received to date (Add lines a and b)	c)\$18,000			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A. a) Total aggregate expenses for this reporting period for salaries, benefits,				
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$			

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$
d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lowhom paid or to whom charged.	obbying fees during this reporting period, including b
Paid to: Amount:	\$
	\$
	\$
	\$
	\$
<u></u>	\$
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the best of my knowledge and belief. Jusau H. Paschell	
7/26/2	017
(Signature of lobbyist) (Date)	
Susan H. Paschell (Print Name of lobbyist)	

AUG 0 1 2017

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

NEW HAMPSHIRE DEPARTMENT OF STATE

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirm Statement of Income and						
Name of Lobbying partnership, firm, or corporation: The Dupont Group						
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular						
client): Bi State Primary	Care Association					
Date of Report (check one	e):					
April 26, 2017 🗆	July 26, 2017 X	October 25, 2017 [January 31, 2018 🗌			
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):						
1_Addendum A(s).						
0 Addendum B(s).						
0Addendum C(s).						
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.						
of The	·					
(Signature of lobbyist)		4/26/2 (Date)	017			
James P. Monahan (Print Name of lobbyist)						